County: Dodge CLEARVIEW SOUTH 199 HOME ROAD

JUNEAU 530	D39 Phone: (920) 386-3400)	Ownership:	County
Operated from 1/1	To 12/31 Days of Operation	: 365	Highest Level License:	Skilled
Operate in Conjunction	on with Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds Set U	o and Staffed (12/31/03):	120	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed Ca	apacity (12/31/03):	120	Title 19 (Medicaid) Certified?	Yes
Number of Residents	on 12/31/03:	104	Average Daily Census:	110

Services Provided to Non-Residents		Age, Gender, and Primary Di	agnosis	of Residents (1	2/31/03)	Length of Stay (12/31/03)	용
Home Health Care Supp. Home Care-Personal Care	No No	 Primary Diagnosis 					11.5 41.3
Supp. Home Care-Household Services	No	Developmental Disabilities	1.0	Under 65	20.2	More Than 4 Years	42.3
Day Services Respite Care	No No	Mental Illness (Other)	8.7	65 - 74 75 - 84	15.4 26.9	İ	95.2
Adult Day Care Adult Day Health Care	No No	Alcohol & Other Drug Abuse Para-, Quadra-, Hemiplegic		85 - 94 95 & Over		************************************	
Congregate Meals Home Delivered Meals	No No	Cancer Fractures		 		Nursing Staff per 100 Resi	
Other Meals	No	Cardiovascular	13.5	65 & Over	79.8	i	
Transportation Referral Service	No No	Cerebrovascular Diabetes		 Gender	 ৪	•	6.8 15.9
Other Services Provide Day Programming for	No	Respiratory Other Medical Conditions		 Male		Nursing Assistants, Aides, & Orderlies	52.0
Mentally Ill	Yes			Female	65.4	İ	32.0
Provide Day Programming for Developmentally Disabled	Yes	 	100.0	 	100.0	I and the second	

Method of Reimbursement

		Medicare			edicaid itle 19			Other			Private Pay	:		amily Care			anaged Care	l 		
Level of Care	No.	90	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	90	Per Diem (\$)	No.	96	Per Diem (\$)	Total Resi- dents	of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	3	100.0	234	88	97.8	112	0	0.0	0	11	100.0	215	0	0.0	0	0	0.0	0	102	98.1
Intermediate				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				2	2.2	142	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	1.9
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depender	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	3	100.0		90	100.0		0	0.0		11	100.0		0	0.0		0	0.0		104	100.0

Admissions, Discharges, and		Percent Distribution	n of Residents'	Condit	ions, Services, an	d Activities as of 12	/31/03
Deaths During Reporting Period					% Needing		Total
Percent Admissions from:		Activities of	8		sistance of	% Totally	Number of
Private Home/No Home Health	4.9	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	5.8		69.2	25.0	104
Other Nursing Homes	14.6	Dressing	16.3		62.5	21.2	104
Acute Care Hospitals	70.7	Transferring	30.8		34.6	34.6	104
Psych. HospMR/DD Facilities	4.9	Toilet Use	24.0		45.2	30.8	104
Rehabilitation Hospitals	0.0	Eating	64.4		24.0	11.5	104
Other Locations	4.9	*****	******	*****	* * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * * *	*****
otal Number of Admissions	41	Continence		용	Special Treatmen	ts	용
ercent Discharges To:		Indwelling Or Extern	nal Catheter	9.6	Receiving Resp	iratory Care	16.3
Private Home/No Home Health	14.0	Occ/Freq. Incontiner	nt of Bladder	62.5	Receiving Trac	heostomy Care	1.0
Private Home/With Home Health	0.0	Occ/Freq. Incontiner	nt of Bowel	46.2	Receiving Suct	ioning	1.9
Other Nursing Homes	12.0	-			Receiving Osto	my Care	4.8
Acute Care Hospitals	12.0	Mobility			Receiving Tube	Feeding	2.9
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	3.8	Receiving Mech	anically Altered Diet	s 33.7
Rehabilitation Hospitals	0.0				_	_	
Other Locations	6.0	Skin Care			Other Resident C	haracteristics	
Deaths	56.0	With Pressure Sores		4.8	Have Advance D	irectives	59.6
otal Number of Discharges		With Rashes		7.7	Medications		
(Including Deaths)	50				Receiving Psyc	hoactive Drugs	74.0

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

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		Owne	ership:	Bed	Size:	Lic	ensure:		
	This	Gove	ernment	100	-199	Ski	lled	Al	1
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities
	8	% Rat		% Ratio		용	Ratio	ઇ	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	68.3	88.1	0.77	87.2	0.78	88.1	0.77	87.4	0.78
Current Residents from In-County	52.9	55.3	0.96	78.9	0.67	69.7	0.76	76.7	0.69
Admissions from In-County, Still Residing	31.7	26.8	1.18	23.1	1.37	21.4	1.48	19.6	1.61
Admissions/Average Daily Census	37.3	57.4	0.65	115.9	0.32	109.6	0.34	141.3	0.26
Discharges/Average Daily Census	45.5	59.7	0.76	117.7	0.39	111.3	0.41	142.5	0.32
Discharges To Private Residence/Average Daily Census	6.4	17.8	0.36	46.3	0.14	42.9	0.15	61.6	0.10
Residents Receiving Skilled Care	98.1	85.9	1.14	96.5	1.02	92.4	1.06	88.1	1.11
Residents Aged 65 and Older	79.8	88.5	0.90	93.3	0.86	93.1	0.86	87.8	0.91
Title 19 (Medicaid) Funded Residents	86.5	76.4	1.13	68.3	1.27	68.8	1.26	65.9	1.31
Private Pay Funded Residents	10.6	18.1	0.59	19.3	0.55	20.5	0.52	21.0	0.50
Developmentally Disabled Residents	1.0	0.5	1.79	0.5	2.04	0.5	1.92	6.5	0.15
Mentally Ill Residents	39.4	47.1	0.84	39.6	1.00	38.2	1.03	33.6	1.17
General Medical Service Residents	26.0	21.1	1.23	21.6	1.20	21.9	1.19	20.6	1.26
Impaired ADL (Mean)	48.5	44.7	1.08	50.4	0.96	48.0	1.01	49.4	0.98
Psychological Problems	74.0	62.8	1.18	55.3	1.34	54.9	1.35	57.4	1.29
Nursing Care Required (Mean)	9.1	7.8	1.17	7.4	1.23	7.3	1.26	7.3	1.25